

CANNABIS MICROBUSINESS LICENSE APPLICATION
ATTACHMENT B - MANUFACTURER

Office Use Only

Application ID Record Number:

Name of Applicant (sole proprietor first and last, all other business types legal business name)

SECTION A - OPERATIONAL ACTIVITIES Select ALL manufacturing activities to be conducted at the premises.

NOTE: Microbusinesses can only conduct cannabis extractions using non-volatile solvents or no solvent extractions.

Are you conducting cannabis extractions? ☐ Yes ☐ No

If yes, please select ALL extraction methods to be conducted at the premises:

- | | |
|---|---|
| <input type="checkbox"/> Carbon Dioxide (CO ₂) | <input type="checkbox"/> Mechanical |
| <input type="checkbox"/> Ethanol | <input type="checkbox"/> Water/Food-Grade Dry Ice |
| <input type="checkbox"/> Food-Grade Butter, Oil, and Glycerin | <input type="checkbox"/> Other (attach a detailed description of the non-volatile or no solvent extraction method and any safety procedures to mitigate the associated risks) |

Are you conducting infusion operations? ☐ Yes ☐ No

If yes, please select ALL product types to be manufactured at the premises:

- | | | | |
|---|--|--|--|
| <input type="checkbox"/> Capsules or Tablets | <input type="checkbox"/> Suppositories | <input type="checkbox"/> Topicals | <input type="checkbox"/> Vape Cartridges |
| <input type="checkbox"/> Edibles or Beverages | <input type="checkbox"/> Tinctures | <input type="checkbox"/> Transdermal Patches | <input type="checkbox"/> Other (specify product type): |

Are you conducting packaging and labeling of cannabis products? ☐ Yes ☐ No

SECTION B - REQUIRED ATTACHMENTS

All Manufacturers:

- ☐ A description of the quality control procedures.
- ☐ A detailed diagram of the proposed premises with the manufacturing area clearly delineated.
- ☐ A list of all cannabis products manufactured under this license for each product type selected in Section A (i.e. [brand name], [mg of CBD or THC], [product identity (cookies, brownies, etc.)])
- ☐ A description of the inventory control procedures.

Extraction:

- ☐ A copy of the closed-loop system certification signed by a California-licensed engineer attesting that the system was commercially manufactured, safe for its intended use, and built to codes of recognized and generally accepted good engineering practices. The certification document must contain the stamp of the California-licensed professional engineer and the serial number for the extraction unit being certified (CCR, Title 17, section 40225).
- ☐ If conducting an extraction method not listed in Section A, attach a detailed description of the extraction method and any safety procedures to mitigate the associated risk.

Infusions:

- ☐ A list of all infused products to be manufactured.

SECTION C - DECLARATIONS

I acknowledge that I understand that this information may be shared with the California Department of Public Health.

Under penalty of perjury, I hereby declare that the information contained within and submitted with the application is complete, true, and accurate. I understand that a misrepresentation of fact is cause for rejection of this application, denial of a license, or revocation of a license issued.

Signature

Printed Name

Date Signed